Office of Health Care Assurance

State Licensing Section

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

| Facility's Name: Yaying House Inc. | CHAPTER 100.1 |
|--|--------------------------------|
| Address: 3285 Olu Street, Honolulu, Hawaii 96816 | Inspection Date: March 8, 2019 |

| Rules (Criteria) | Plan of Correction | Completion Date |
|------------------|---------------------|--------------------|
| NO DEFICIENCIES | NOT APPLICABLE (NA) | NA |
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